

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:
04/26/2016
Document Number:
666802091
Overall Inspection:
SATISFACTORY w/ CMT or AR

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>289191</u>	<u>334777</u>	<u>Murray, Richard</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96850</u>
Name of Operator:	<u>WPX ENERGY ROCKY MOUNTAIN LLC</u>
Address:	<u>PO BOX 370</u>
City:	<u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</u>

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
, Inspections		COGCCInspectionReports@wpxenergy.com	Field Inspections

Compliance Summary:

QtrQtr:	<u>NESW</u>	Sec:	<u>4</u>	Twp:	<u>7S</u>	Range:	<u>94W</u>
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/05/2014	666800260	PR	PR	SATISFACTORY			No
01/05/2010	200292496	PR	PR	SATISFACTORY			No

Inspector Comment:

Inspection does not address future designation area as Centralized E&P Facility or permit application.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
263902	WELL	PR	10/21/2002	GW	045-08153	BERNKLAU RWF 24-4	PR	<input checked="" type="checkbox"/>
263904	WELL	PR	10/21/2002	GW	045-08155	BERNKLAU RWF 23-4	PR	<input checked="" type="checkbox"/>
263905	WELL	PR	10/21/2002	GW	045-08156	BERNKLAU RWF 323-4	PR	<input checked="" type="checkbox"/>
289191	WELL	PR	02/05/2007	GW	045-13685	WILLIAMS RWF 424-4	PR	<input checked="" type="checkbox"/>
289192	WELL	PR	02/05/2007	GW	045-13684	WILLIAMS RWF 524-4	PR	<input checked="" type="checkbox"/>
289193	WELL	PR	02/05/2007	GW	045-13683	WILLIAMS RWF 324-4	PR	<input checked="" type="checkbox"/>
289194	WELL	PR	02/05/2007	GW	045-13682	WILLIAMS RWF 612-4	PR	<input checked="" type="checkbox"/>
289195	WELL	PR	02/05/2007	GW	045-13681	WILLIAMS RWF 423-4	PR	<input checked="" type="checkbox"/>
414573	PIT	AC	03/22/2011		-	RWF 24-4	AC	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Inspector Name: Murray, Richard

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	AIRS ID 045/0813/002		

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
STORAGE OF SUPL	SATISFACTORY	Valves, pipe and rubber hoses stored by pit		

Spills:

Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Horizontal Heated Separator	# 8	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date: _____
Type: Plunger Lift	# 8	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date: _____
Type: Ancillary equipment	# 2	Satisfactory/Action Required:	SATISFACTORY
Comment	Chemical unit at wellhead		
Corrective Action			Date: _____

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	39.463360,-107.895790
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Insufficient	Base Sufficient	Inadequate
Corrective Action	repair or install berms or other secondary containment			Corrective Date 05/12/2016
Comment	No continuous berm around tanks by pit			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	STEEL AST	39.463630,-107.895602
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	500 BBLS	STEEL AST	,
S/AR			Comment:	
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition				
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				

Inspector Name: Murray, Richard

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	400 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment: In metal berm	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Venting:

Yes/No	YES
Comment	

Flaring:

Type	Satisfactory/Action Required
Comment:	

Corrective Action: _____	Correct Action Date: _____
--------------------------	----------------------------

Predrill

Location ID: 289191

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: <u>263902</u>	Type: <u>WELL</u>	API Number: <u>045-08153</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
----------------------------	-------------------	------------------------------	-------------------	-------------------------

Producing Well

Comment: Plunger Lift

Facility ID: <u>263904</u>	Type: <u>WELL</u>	API Number: <u>045-08155</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
----------------------------	-------------------	------------------------------	-------------------	-------------------------

Producing Well

Comment: Plunger Lift

Facility ID: <u>263905</u>	Type: <u>WELL</u>	API Number: <u>045-08156</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
----------------------------	-------------------	------------------------------	-------------------	-------------------------

Producing Well

Comment: **Plunger Lift**

Facility ID: 289191 Type: WELL API Number: 045-13685 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger Lift**

Facility ID: 289192 Type: WELL API Number: 045-13684 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger Lift**

Facility ID: 289193 Type: WELL API Number: 045-13683 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger Lift**

Facility ID: 289194 Type: WELL API Number: 045-13682 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger Lift**

Facility ID: 289195 Type: WELL API Number: 045-13681 Status: PR Insp. Status: PR

Producing Well

Comment: **Plunger Lift**

Facility ID: 414573 Type: PIT API Number: - Status: AC Insp. Status: AC

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____
 Corrective Action: _____ Date: _____
 Reportable: _____ GPS: Lat _____ Long _____
 Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): N

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1003a. Waste and Debris removed? Pass

CM _____
CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass

CM _____
CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass

CM _____
CA _____ CA Date _____

Guy line anchors marked? _____

CM _____
CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Inspector Name: Murray, Richard

Compaction alleviation _____ Dust and erosion control _____
 Non cropland: Revegetated 80% _____ Cropland: perennial forage _____
 Weeds present _____ Subsidence _____
 Comment: _____
 Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location Multi-Well Location

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Ditches	Pass			
Sediment Traps	Pass					
		Culverts	Pass			
		Gravel	Pass			
Compaction	Pass					
Drains	Pass					

S/A/V: SATISFACTOR _____ Corrective Date: _____
 Y _____

Comment: _____
 CA: _____

Pits: NO SURFACE INDICATION OF PIT

Pit Type: Produced Water Lined: YES Pit ID: 414573 Lat: 39.463430 Long: -107.895600

Lining:
 Liner Type: Plastic Liner Condition: Adequate
 Comment: _____

Fencing:
 Fencing Type: Netting/Fen Fencing Condition: Adequate
 Comment: _____

Netting:
 Netting Type: Mesh Netting Condition: Good
 Comment: _____

Anchor Trench Present: YES Oil Accumulation: NO 2+ feet Freeboard: _____
 Pit (S/A/V): SATISFACTOR Comment: _____
 Corrective Action: _____ Date: _____

Permit:	Facility ID	Permit Num	Expiration Date
	414573	1631099	
	414573	1631099	

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
666802095	1418	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3841652

666802096	1420	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3841653
-----------	------	---